A bill to be entitled

An act relating to the Florida Hurricane Catastrophe Fund; amending s. 215.555,F.S.; reducing the coverage limits for the fund's mandatory coverage; creating a coverage limit increase option ("CLIO"); requiring the offer of specified optional coverage limits; providing definitions; specifying the terms of the CLIO options addendum to the reimbursement contract; providing for determination of a CLIO premium formula and CLIO premiums; specifying impact on the claims paying capacity of the fund; deleting expired provisions relating to the temporary increase in coverage limits ("TICL") option; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Effective June 1, 2015, paragraph (c) of subsection (4) and subsection (16) of section 215.555, Florida Statutes, are amended to read:

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215.555 Florida Hurricane Catastrophe Fund.-

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(4) REIMBURSEMENT CONTRACTS.-

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(c)1. The contract shall also provide that the obligation of the board with respect to all contracts covering a particular contract year shall not exceed the actual claims-paying capacity of the fund up to a limit of \$14\$ \$17 billion for that contract

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year, unless the board determines that there is sufficient

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estimated claims-paying capacity to provide $\frac{\$14}{\$17}$ billion of capacity for the current contract year and an additional $\frac{\$14}{\$17}$ billion of capacity for subsequent contract years. If the board makes such a determination, the estimated claims-paying capacity for the particular contract year shall be determined by adding to the $\frac{\$14}{\$17}$ billion limit one-half of the fund's estimated claims-paying capacity in excess of $\frac{\$28}{\$34}$ billion. However, the dollar growth in the limit may not increase in any year by an amount greater than the dollar growth of the balance of the fund as of December 31, less any premiums or interest attributable to optional coverage, as defined by rule which occurred over the prior calendar year.

2. In May and October of the contract year, the board shall publish in the Florida Administrative Register a statement of the fund's estimated borrowing capacity, the fund's estimated claims-paying capacity, and the projected balance of the fund as of December 31. After the end of each calendar year, the board shall notify insurers of the estimated borrowing capacity, estimated claims-paying capacity, and the balance of the fund as of December 31 to provide insurers with data necessary to assist them in determining their retention and projected payout from the fund for loss reimbursement purposes. In conjunction with the development of the premium formula, as provided for in subsection (5), the board shall publish factors or multiples that assist insurers in determining their retention and projected payout for the next contract year. For all regulatory

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and reinsurance purposes, an insurer may calculate its projected payout from the fund as its share of the total fund premium for the current contract year multiplied by the sum of the projected balance of the fund as of December 31 and the estimated borrowing capacity for that contract year as reported under this subparagraph.

- (16) COVERAGE LIMIT INCREASE OPTION ("CLIO") TEMPORARY

 INCREASE IN COVERAGE LIMIT OPTIONS.—
 - (a) Findings and intent.-
- available for private catastrophe reinsurance and reinsurance alternatives such as catastrophe bonds has created an opportunity to transfer additional hurricane risk to the private sector and to reduce the share of Florida hurricane risk borne by the public without destabilizing the residential property insurance market. However, the Legislature also recognizes the benefit of continuing to make current levels of Florida Hurricane Catastrophe Fund coverage available as a transitional option that can minimize market disruptions while additional hurricane risk is transferred from the public sector to the private sector.
- 2. The coverage limit increase option created under this subsection is intended to balance the opportunity for greater risk transfer with the continuing need to maintain a stable and ongoing source of reimbursement as described in subsection (1).
 - (b) Applicability of other provisions of this section.—All

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provisions of this section and the rules adopted under this section apply to the coverage created by this subsection unless specifically superseded by provisions in this subsection.

- (c) Optional coverage.—The board must offer the optional coverage limits as provided in this subsection each year, and the insurer must make its selections of optional coverage, if any, by executing the CLIO addendum at the same time as it executes the reimbursement contract as required by paragraph (17)(c).
- (d) Additional definitions.—As used in this subsection,
 the term:
 - 1. "FHCF" means Florida Hurricane Catastrophe Fund.
- 2. "FHCF reimbursement premium" means the premium paid by an insurer for its coverage as a mandatory participant in the FHCF, but does not include additional premiums for optional coverages.
- 3. "Payout multiple" means the number or multiple created by dividing the statutorily defined claims-paying capacity as determined in subparagraph (4)(c)1. by the aggregate reimbursement premiums paid by all insurers estimated or projected as of calendar year-end.
- 4. "CLIO options" means the options for increased coverage limits created under this subsection.
- 5. "CLIO insurer" means an insurer that has opted to obtain coverage under the CLIO options addendum in addition to the coverage provided to the insurer under its FHCF

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reimbursement contract.

- 6. "CLIO reimbursement premium" means the premium charged by the fund for coverage provided under the CLIO option.
- 7. "CLIO coverage multiple" means the coverage multiple when multiplied by an insurer's reimbursement premium that defines the increase in coverage limit.
- 8. "CLIO coverage" means the coverage for an insurer's losses above the insurer's statutorily determined claims-paying capacity based on the claims-paying limit in subparagraph (4)(c)1., which an insurer selects as its increase in coverage from the fund under the CLIO options selected. A CLIO insurer's increased coverage limit options shall be calculated as follows:
- a. The board shall calculate and report to each CLIO insurer the CLIO coverage multiples based on three options for increasing the insurer's FHCF coverage limit. The CLIO coverage multiple shall be calculated by dividing \$1 billion, \$2 billion, or \$3 billion by the total estimated aggregate FHCF reimbursement premiums for the relevant contract year.
- b. The amount by which the CLIO insurer's limit is increased over the limit calculated under paragraph (4)(d) equals the FHCF reimbursement premium multiplied by the CLIO coverage multiple.
- c. In order to determine the CLIO insurer's limit of coverage, the CLIO insurer shall add its CLIO coverage multiple to its payout multiple. The sum of the multiples is the number that, when multiplied by the insurer's FHCF reimbursement

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- premium as calculated under subsection (5), defines the CLIO
 insurer's limit of FHCF reimbursement coverage for that
 reimbursement contract year.
 - 9. "CLIO options addendum" means an addendum to the reimbursement contract reflecting the obligations of the fund and insurers selecting an option to increase an insurer's FHCF coverage limit.
 - (e) CLIO options addendum.-
 - 1. The CLIO options addendum shall provide for reimbursement of CLIO insurers for covered events occurring during the relevant contract year in exchange for the CLIO reimbursement premium paid into the fund under paragraph (f).
 - 2. The CLIO addendum shall contain a promise by the board to reimburse the CLIO insurer for 45 percent, 75 percent, or 90 percent of its losses from each covered event in excess of the insurer's retention, plus 5 percent of the reimbursed losses to cover loss adjustment expenses. The percentage shall be the same as the coverage level selected by the insurer under paragraph (4) (b).
 - 3. The CLIO addendum shall provide that reimbursement amounts shall not be reduced by reinsurance paid or payable to the insurer from other sources.
 - 4. The priorities, schedule, and method of reimbursements under the CLIO addendum shall be the same as provided under subsection (4).
 - (f) CLIO reimbursement premiums.—Subject to all

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requirements, standards, and procedures of paragraph (5)(b), the board shall adopt a separate CLIO premium formula for the optional coverage limits provided under this subsection. Each CLIO insurer shall pay to the fund, in the manner and at the time provided in the reimbursement contract for payment of reimbursement premiums, a CLIO reimbursement premium as determined under this paragraph.

- optional coverage program created by this subsection shall increase the claims-paying capacity of the fund as provided in subparagraph (4)(c)1. by an amount not to exceed \$3 billion and shall depend on the CLIO coverage options available and selected for the specified contract year and the number of insurers that select the CLIO optional coverage. The additional capacity shall apply only to the additional coverage provided under the CLIO options and shall not otherwise affect any insurer's reimbursement from the fund if the insurer chooses not to select the option to increase its limit of coverage under the FHCF.
- a. Because of temporary disruptions in the market for catastrophic reinsurance, many property insurers were unable to procure sufficient amounts of reinsurance for the 2006 hurricane season or were able to procure such reinsurance only by incurring substantially higher costs than in prior years.
- b. The reinsurance market problems were responsible, at least in part, for substantial premium increases to many consumers and increases in the number of policies issued by

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Citizens Property Insurance Corporation.

c. It is likely that the reinsurance market disruptions will not significantly abate prior to the 2007 hurricane season.

2. It is the intent of the Legislature to create options for insurers to purchase a temporary increased coverage limit above the statutorily determined limit in subparagraph (4)(c)1., applicable for the 2007, 2008, 2009, 2010, 2011, 2012, and 2013 hurricane seasons, to address market disruptions and enable insurers, at their option, to procure additional coverage from the Florida Hurricane Catastrophe Fund.

- (b) Applicability of other provisions of this section.—All provisions of this section and the rules adopted under this section apply to the coverage created by this subsection unless specifically superseded by provisions in this subsection.
- (c) Optional coverage.—For the 2009-2010, 2010-2011, 2011-2012, 2012-2013, and 2013-2014 contract years, the board shall offer, for each of such years, the optional coverage as provided in this subsection.
- (d) Additional definitions.—As used in this subsection, the term:
 - 1. "FHCF" means Florida Hurricane Catastrophe Fund.
- 2. "FHCF reimbursement premium" means the premium paid by an insurer for its coverage as a mandatory participant in the FHCF, but does not include additional premiums for optional coverages.
 - 3. "Payout multiple" means the number or multiple created

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by dividing the statutorily defined claims-paying capacity as determined in subparagraph (4)(c)1. by the aggregate reimbursement premiums paid by all insurers estimated or projected as of calendar year-end.

- 4. "TICL" means the temporary increase in coverage limit.
- 5. "TICL options" means the temporary increase in coverage options created under this subsection.
- 6. "TICL insurer" means an insurer that has opted to obtain coverage under the TICL options addendum in addition to the coverage provided to the insurer under its FHCF reimbursement contract.
- 7. "TICL reimbursement premium" means the premium charged by the fund for coverage provided under the TICL option.
- 8. "TICL coverage multiple" means the coverage multiple when multiplied by an insurer's reimbursement premium that defines the temporary increase in coverage limit.
- 9. "TICL coverage" means the coverage for an insurer's losses above the insurer's statutorily determined claims-paying capacity based on the claims-paying limit in subparagraph (4)(c)1., which an insurer selects as its temporary increase in coverage from the fund under the TICL options selected. A TICL insurer's increased coverage limit options shall be calculated as follows:
- a. The board shall calculate and report to each TICL insurer the TICL coverage multiples based on 12 options for increasing the insurer's FHCF coverage limit. Each TICL coverage

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multiple shall be calculated by dividing \$1 billion, \$2 billion, \$3 billion, \$4 billion, \$5 billion, \$6 billion, \$7 billion, \$8 billion, \$9 billion, \$10 billion, \$11 billion, or \$12 billion by the total estimated aggregate FHCF reimbursement premiums for the 2007-2008 contract year, and the 2008-2009 contract year.

b. For the 2009-2010 contract year, the board shall calculate and report to each TICL insurer the TICL coverage multiples based on 10 options for increasing the insurer's FHCF coverage limit. Each TICL coverage multiple shall be calculated by dividing \$1 billion, \$2 billion, \$3 billion, \$4 billion, \$5 billion, \$6 billion, \$7 billion, \$8 billion, \$9 billion, and \$10 billion by the total estimated aggregate FHCF reimbursement premiums for the 2009-2010 contract year.

c. For the 2010-2011 contract year, the board shall calculate and report to each TICL insurer the TICL coverage multiples based on eight options for increasing the insurer's FHCF coverage limit. Each TICL coverage multiple shall be calculated by dividing \$1 billion, \$2 billion, \$3 billion, \$4 billion, \$5 billion, \$6 billion, \$7 billion, and \$8 billion by the total estimated aggregate FHCF reimbursement premiums for the contract year.

d. For the 2011-2012 contract year, the board shall calculate and report to each TICL insurer the TICL coverage multiples based on six options for increasing the insurer's FHCF coverage limit. Each TICL coverage multiple shall be calculated by dividing \$1 billion, \$2 billion, \$3 billion, \$4 billion, \$5

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billion, and \$6 billion by the total estimated aggregate FHCF reimbursement premiums for the 2011-2012 contract year.

e. For the 2012-2013 contract year, the board shall calculate and report to each TICL insurer the TICL coverage multiples based on four options for increasing the insurer's FHCF coverage limit. Each TICL coverage multiple shall be calculated by dividing \$1 billion, \$2 billion, \$3 billion, and \$4 billion by the total estimated aggregate FHCF reimbursement premiums for the 2012-2013 contract year.

f. For the 2013-2014 contract year, the board shall calculate and report to each TICL insurer the TICL coverage multiples based on two options for increasing the insurer's FHCF coverage limit. Each TICL coverage multiple shall be calculated by dividing \$1 billion and \$2 billion by the total estimated aggregate FHCF reimbursement premiums for the 2013-2014 contract year.

g. The TICL insurer's increased coverage shall be the FHCF reimbursement premium multiplied by the TICL coverage multiple. In order to determine an insurer's total limit of coverage, an insurer shall add its TICL coverage multiple to its payout multiple. The total shall represent a number that, when multiplied by an insurer's FHCF reimbursement premium for a given reimbursement contract year, defines an insurer's total limit of FHCF reimbursement coverage for that reimbursement contract year.

10. "TICL options addendum" means an addendum to the

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reimbursement contract reflecting the obligations of the fund and insurers selecting an option to increase an insurer's FHCF coverage limit.

(e) TICL options addendum.

1. The TICL options addendum shall provide for reimbursement of TICL insurers for covered events occurring during the 2009-2010, 2010-2011, 2011-2012, 2012-2013, and 2013-2014 contract years in exchange for the TICL reimbursement premium paid into the fund under paragraph (f) based on the TICL coverage available and selected for each respective contract year. Any insurer writing covered policies has the option of selecting an increased limit of coverage under the TICL options addendum and shall select such coverage at the time that it executes the FHCF reimbursement contract.

2. The TICL addendum shall contain a promise by the board to reimburse the TICL insurer for 45 percent, 75 percent, or 90 percent of its losses from each covered event in excess of the insurer's retention, plus 5 percent of the reimbursed losses to cover loss adjustment expenses. The percentage shall be the same as the coverage level selected by the insurer under paragraph (4)(b).

3. The TICL addendum shall provide that reimbursement amounts shall not be reduced by reinsurance paid or payable to the insurer from other sources.

4. The priorities, schedule, and method of reimbursements under the TICL addendum shall be the same as provided under

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subsection (4).

(f) TICL reimbursement premiums.—Each TICL insurer shall pay to the fund, in the manner and at the time provided in the reimbursement contract for payment of reimbursement premiums, a TICL reimbursement premium determined as specified in subsection (5), except that a cash build-up factor does not apply to the TICL reimbursement premiums. However, the TICL reimbursement premium shall be increased in the 2009-2010 contract year by a factor of two, in the 2010-2011 contract year by a factor of three, in the 2011-2012 contract year by a factor of four, in the 2012-2013 contract year by a factor of five, and in the 2013-2014 contract year by a factor of six.

(g) Effect on claims-paying capacity of the fund.—For the 2009-2010, 2010-2011, 2011-2012, 2012-2013, and 2013-2014 contract years, the program created by this subsection shall increase the claims-paying capacity of the fund as provided in subparagraph (4) (c) 1. by an amount not to exceed \$12 billion and shall depend on the TICL coverage options available and selected for the specified contract year and the number of insurers that select the TICL optional coverage. The additional capacity shall apply only to the additional coverage provided under the TICL options and shall not otherwise affect any insurer's reimbursement from the fund if the insurer chooses not to select the temporary option to increase its limit of coverage under the FHCF.

Section 2. This act shall take effect upon becoming a law.

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